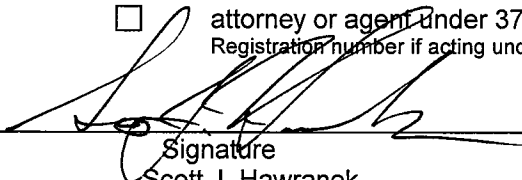


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <b>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b>		Docket Number (Optional) FR030121US																								
Application No. 10/575,425		Filed: April 10, 2006																								
For: DIFFERENTIAL INPUT AND OUTPUT TRANSDUCTANCE CIRCUIT																										
Art Unit: 2816		Examiner: Poos, John W.																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 40%;"></th><th style="width: 15%; text-align: center;"><u>Fee</u></th><th style="width: 15%; text-align: center;"><u>Small Entity Fee</u></th><th style="width: 30%;"></th></tr></thead><tbody><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: center;">\$ <u>130</u></td><td style="text-align: center;">\$ <u>65</u></td><td style="text-align: center;">\$ <u>130</u></td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: center;">\$ <u>490</u></td><td style="text-align: center;">\$ <u>245</u></td><td style="text-align: center;">\$ <u>0</u></td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: center;">\$ <u>1110</u></td><td style="text-align: center;">\$ <u>555</u></td><td style="text-align: center;">\$ <u>0</u></td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: center;">\$ <u>1730</u></td><td style="text-align: center;">\$ <u>865</u></td><td style="text-align: center;">\$ <u>0</u></td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: center;">\$ <u>2350</u></td><td style="text-align: center;">\$ <u>1175</u></td><td style="text-align: center;">\$ <u>0</u></td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account #50-1123.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1123.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>52,411</u>.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 60%;"> _____ Signature Scott J. Hawranek Typed or printed name</div><div style="width: 35%; text-align: center;"><u>2/23/09</u> _____ Date (719) 448-5920 Telephone Number</div></div> <p><b>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</b></p> <p><input type="checkbox"/> Total of <u>1</u> form is submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>130</u>	\$ <u>65</u>	\$ <u>130</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>490</u>	\$ <u>245</u>	\$ <u>0</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>1110</u>	\$ <u>555</u>	\$ <u>0</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1730</u>	\$ <u>865</u>	\$ <u>0</u>	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2350</u>	\$ <u>1175</u>	\$ <u>0</u>
	<u>Fee</u>	<u>Small Entity Fee</u>																								
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>130</u>	\$ <u>65</u>	\$ <u>130</u>																							
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>490</u>	\$ <u>245</u>	\$ <u>0</u>																							
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>1110</u>	\$ <u>555</u>	\$ <u>0</u>																							
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1730</u>	\$ <u>865</u>	\$ <u>0</u>																							
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2350</u>	\$ <u>1175</u>	\$ <u>0</u>																							